



# RINECO

819 Vulcan Rd. • Haskell  
Benton, AR 72015  
PH: 501-778-9089 • FAX: 501-778-8505

Remit To:

P.O. Box 729  
Benton, AR 72018

\*\*\*\*\* INVOICE \*\*\*\*\*

PAGE: 1

*Marcia*

INVOICE NUMBER: 0088485-IN

INVOICE DATE: 12/11/98

DUE DATE: 01/10/99

00-BOE540

BOEING/DOUGLAS AIRCRAFT-CA  
PO BOX 2731  
3855 LAKEWOOD BLVD  
LONG BEACH CA 90801  
CONTACT: ACCOUNTS PAYABLE

GENERATOR:

BOEING/DOUGLAS AIRCRAFT-CA  
PO BOX 2731  
3855 LAKEWOOD BLVD  
LONG BEACH CA 90801

COMMENT:

MANIFEST #: AR860834

MANIFEST DATE: 12/05/98

N01 WEST COAST

CUSTOMER PO#: BCZ111232-R

SHIP VIA: SLT

CONTROL NO: 8120150

TERMS: NET 30 DAYS

DESCRIPTION

UNIT

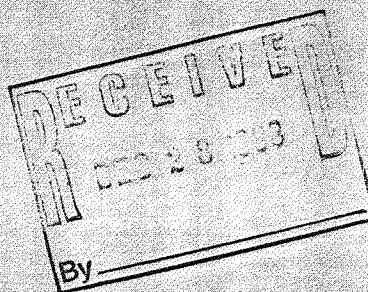
PROCESSED

PRICE

AMOUNT

A/ S2 SHRED SOLID 55 GAL DRM 1.00 185.00 185.00

*Item 01 PN: 1710SER246896*



*OK to pay Marcia Safford Dept Q6C K66524*

THANK YOU FOR YOUR BUSINESS

SAFETY HEALTH AND ENVIRONMENTAL AFFAIRS

INVOICE TOTAL:

185.00

JAN 08 1999

ORIGINAL

BOE-C6-0200291



STATE OF ARKANSAS  
Department of Pollution Control and Ecology  
P.O. Box 8913 Little Rock, Arkansas 72219-8913  
Telephone 501-682-0744

8120150

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Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. EXPIRES 9-30-97

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address <b>Douglas Aircraft Co., M/S D009-D020 3855 Lakewood Blvd. Long Beach, CA 90846</b>		6. US EPA ID Number <b>CAD0865100005610834</b>		B. State Generator ID <b>HA EF 36005698</b>	
4. Generator's Phone ( ) <b>562-496-6524</b>		7. Transporter 1 Company Name <b>Ecology Control Industries</b>		D. Transporter's Phone ( ) <b>(310) 320-2555</b>	
5. Transporter 2 Company Name <b>SLT Express</b>		8. US EPA ID Number <b>UTD981552425</b>		E. State Transporter's ID <b>(800) 627-3047</b>	
9. Designated Facility Name and Site Address <b>Rineco Chemical, Ind. 1007 Vulcan- Haskell Road Benton, AR 72105</b>		10. US EPA ID Number <b>ARD981057870</b>		G. State Facility's ID <b>(501) 778-9089</b>	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. <b>RQ, Hazardous waste solid, n.o.s. (Chromium), 9, NA3077, PGIII (D007)</b>		No. <b>001</b>	Type <b>DM</b>	<b>00100</b>	<b>P</b>
b.					
c.					
d.					
11a. Additional Description for Materials Listed Above <b>11a. 4811-01932 Paint in cans, overpacked</b>		K. Emergency/Response Information <b>24 Hour Emergency Telephone Number (800) 424-9300 (CHEMTREC)</b>			
15. Special Handling Instructions and Additional Information <b>DOT ERG#11a) 171 Site address: 19503 South Normandie Avenue, Torrance, CA 90502</b>		If no alternate TSD, return to generator			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and Arkansas state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name <b>Marcia Sattgast</b>		Signature <i>Marcia Sattgast</i>		Month Day Year <b>12.02.98</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Gabriel Lopez</b>		Signature <i>Gabriel Lopez</i>		Month Day Year <b>12.02.98</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name <b>John H Jackson</b>		Signature <i>John H Jackson</i>		Month Day Year <b>12.02.98</b>	
19. Discrepancy Indication Space <b>Not An Official Copy</b>					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name <b>DALE BAIRD</b>		Signature <i>Dale Baird</i>		Month Day Year <b>12.05.98</b>	

EPA Form 8700-22 (Rev. 9-88) Previous edition is obsolete.

NOTICE: THE ORIGINAL AND NOT LESS THAN TWO (2) COPIES MUST MOVE WITH THE HAZARDOUS WASTE SHIPMENT. ONCE DELIVERED, THE TREAT-

BOE-C6-0200292